Date:				
Union Name/Address	3:			
Dear Union President	and Local Steve	warde:		
I am employed by the			ork in the following I	Denartment Agency
Board or Commission work at the following	n of the State of	Illinois:		I primarily
Effective immediately with the local Union.	y, I resign my m	nembership from th	e local Union and all	l Unions affiliated
Because I have resign the Union's dues chec a revocation of my U State of Illinois.	ckoff authorizat	ion that I signed.	Accordingly, I have c	completed and signed
From here on out, unland only responsible law.				
If you refuse to accept the Union automatic of to revoke my automat Union.	dues deduction,	please inform me	n writing of exactly	what must be done
	Sincerely,			
Signature:			_	
Printed Name:			_	